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THE AFRICAN SOCIAL SITUATION, 1982-1987

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I. INTRODUCTION

1. The social situation in Africa generally underwent negative changes between 1982 and 1987. The reasons for this can be found in certain long existing structural problems and the immediate effects of the drought and economic crisis that afflicted the region in that period. Among the major structural problems, three may be cited as having particularly significant effects on the pattern and quality of social change. The first is the fast rate of population growth, and associated demographic patterns, which have bedevilled the planning process for decades. The second is the socially unequal distribution of critical factors of human development and social progress including food and nutrition, health, shelter, education and employment. As is well known, this distribution is biased against the majority of the population that lives mainly in the rural areas and in favour of the socially powerful minority in the urban enclaves.

2. The third problem is at the level of development planning. There is a persistent imbalance between economic and social policies and planning arising mainly from an inappropriate conception of the social development function. Social development is conceived by most planners as a resource-consuming sector whose activities must await the generation of funds and resources by economic and productive sectors. This view has tended to make social policy lag behind economic policy and, at times, to conflict with it. What is more, the expected social improvements have not always flowed from economic development.

3. The impact of the above structural problems has been cumulative on the African social situation. With the severe drought and economic crisis of the early 1980s, intolerable conditions were created for the vast majority of the African people. They faced serious deterioration in their living standards and the problems of mass poverty, hunger, malnutrition, unemployment, underemployment, social tensions and dislocations intensified.

4. Against this background, the ECA Conference of Ministers adopted resolution 601 (XXII) of 24 April 1987 requesting the secretariat, in operative paragraph 7, to report on the African social situation every year. For this first report, the period 1982-1987 has been reviewed in order to assess the social trends and analyse the major problems and policy issues confronting member States.

5. The paper draws mainly on the secretariat's sources which are supplemented, where available, by data from national and international sources. It should be noted, however, that data in the social area are typically available only with a considerable time-lag. Hence the statistical data used are mainly up to 1985-1986. In the following sections, an effort has been made to delineate the general situation of the human condition in Africa today and to highlight the principal, interlocking elements of the social fabric whose trends and effects require particular policy considerations. Thus, the paper provides an overview and brief examinations of the critical issues of population, income, employment, poverty, food and nutrition, health, human settlements, education and literacy, social integration and the political conditions for social development. Finally, some proposals are put forward for policy consideration at the end of the different sections and in the concluding chapter.

II. OVERVIEW OF SOCIAL DEVELOPMENT IN AFRICA, 1982-1987

6. The objective of social development is to enhance the capacity of all persons to realize their full potential for increasing improvements in the quality of their own lives and the welfare of their society. The achievement of this objective depends greatly on economic growth and political development, the other two principal areas of human endeavour with which social development maintains a dynamic relationship. This relationship, if complementary, should seek to improve the quality of life and enrich it with dignity, equity and social justice.

7. The two decades prior to 1980 saw most African countries making modest to significant progress in social development. In fact, impressive quantitative gains were made in education and literacy and considerable progress was attained in the areas of health, family welfare and social infrastructure development, even if these were unequally distributed. However, the crisis of the first half of the 1980s eroded most of these achievements. The drought of 1982-1984 heightened the emergency aspects of the crisis with tragic loss of lives, critical famine, malnutrition and severe dislocations in the normal patterns of social life. By 1987 there were shortfalls in basic needs in nearly all countries.

8. Almost every major indicator of economic and social wellbeing has registered a highly disturbing and/or declining trend since 1982. For instance, up to 1984, there was negative growth in GDP in sub-Saharan Africa and only a modest growth in North Africa. Although the regional economy recovered in 1985 with output growth of 3.0 per cent, it fell by more than half to only 1.2 per cent in 1986. Preliminary assessments of 1987 have indicated a marginal improvement with the region's output growing by 1.5 per cent. Population growth averaged 3.0 per cent in 1980-1985 and per capita income declined at an annual average rate of about 3.4 per cent. In real terms, average income per head in 1985 was between 15 per cent and 25 per cent lower than in 1970 implying a serious retrogression in the living standards of the average African.

9. Hidden within the macro-economic income figures is a highly skewed pattern of income distribution which favours a minority of less than 30 per cent of the population living mainly, though not exclusively, in urban areas. The fast-growing population itself is unevenly and uneconomically distributed in the different age groups. There is a high preponderance of children and young people under 15 years (at least 40 per cent of the total population) which results in a heavy dependency burden. In 1986 the age dependency ratio was 92.9 per cent for Africa as a whole. Nine ECA member States, namely Botswana, Kenya, Nigeria, Rwanda, Sao Tome and Principe, the United Republic of Tanzania, Uganda, Zambia and Zimbabwe, had total age dependency ratios of over 100 per cent (Kenya had 119 per cent). 1/ These rates have serious

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1/ ECA, Population Division, Estimates and Projections of African Population Trends as Assessed in 1986 [ECA/POP/WP/87/1/2.6 (b)], May 1987, annex IV.

implications for the provision of services in education and health as well as for the capacity of the working population to save and invest in productive activities.

10. Although there have been moderate declines in recent years, mortality levels in the continent are still high by world standards and infant mortality rates (IMR) particularly in sub-Saharan Africa have averaged about 25 per cent higher than the average of developing countries in the mid-1980s. The high mortality levels have resulted in low expectations of life at birth, estimated by the United Nations at 50 years in 1985 compared with 73 years average for the more developed regions. 2/ The premature deaths in Africa represent a serious loss in social investments.

11. With regard to employment, 40 per cent of the labour force was estimated to be unemployed or underemployed in mid-1985. Rural-urban migration has continued with most rural immigrants gravitating towards the single dominant metropolitan centres found in most countries. This pattern of migration mimics the enclave nature of the macro-economy whereby a small modern sector dominates the vast, largely neglected, subsistence sector. The rapid increase in the urban population has not only depressed the urban labour market and overstrained social services and amenities but also contributed to the pauperization of large areas of the countryside in various member States. Qualitatively, the social structure in the rural areas has been changing since mostly young and able-bodied males have been migrating to towns leaving behind women, children and the aging. Civil strife, wars and tensions within and between African States and the continuation of apartheid and South Africa's destabilization policies have all contributed to social instability and disruption in the period under review.

12. The destruction of the ecosystem due to poverty and the inadequacy of environmental protection policies have also had a dramatic impact on the social situation. That is the context in which the drought of 1982-1984 dangerously strained the human and social fabric in Africa. At the height of the emergency in 1984, over one million people lost their lives and 30-35 million had to face severe famine, malnutrition and debilitating diseases in 24 countries. Ten million people were displaced from their lands and homes and the pre-existing refugee situation was worsened to reach a level of 5 million people, representing half the world's total. Other hundreds of thousands of skilled, semi-skilled and unskilled men and women left their countries to search for work in other countries within and outside the region. Where those other countries could not accommodate the migrants for one reason or another, the latter were repatriated, sometimes under very difficult and unpleasant circumstances.

2/ United Nations, Living Conditions in Developing Countries in the mid-1980s: Supplement to the 1985 Report on the World Social Situation (ST/ESA/65/Add.1), New York, 1986, p.9, table 2.

13. The crisis has left severe imprints on the lives of millions of African people, but the magnitude and long-term effects have yet to be fully assessed. Severe malnutrition and undernourishment has done some damage to the children who have survived. Social institutions such as the family in its nuclear and extended forms have undergone stresses with the heavy migrations and shrinking household resources. The severe losses of hitherto cultivable land and of livestock and the attendant social dislocations have disrupted many rural communities, some of whom have had to be resettled within several countries. There has been an apparent increase in the variety and incidence of crime, juvenile delinquency and youth disorientation.

14. In spite of the crisis, several countries made notable efforts to improve the social situation in 1982-1987. However, efforts made by many governments to stabilize their economies and achieve structural adjustment have often led to an aggravation of poverty and the further deterioration of the living conditions of the most vulnerable social groups, including small farmers, the urban poor, women and children. Investment in the social sectors which had been increasing only modestly, with the exception of education, before 1982 declined sharply since. Modifications of foreign exchange arrangements, trade liberalization, cuts on imports of or abolition of subsidies on food, drugs, vaccines, water pumps, petrol, kerosene and spare parts have hit the poor the most. Retrenchment in employment levels in the public and private sectors and reduction in salaries and benefits have aggravated income and labour problems. Many countries in the region are still grappling with these and other social costs of the particular structural adjustment programmes.

15. As noted earlier, most of the trends and problems outlined above have developed out of certain fundamental imbalances. Economic issues have largely dominated development planning in Africa since the 1960s and the planning process has tended to relegate social concerns to a secondary level. It has paid insufficient attention to the organization and development of all the human resources in society as capital for accelerated, sustained and equitable growth. 3/ Consequently, mass poverty and inequality have continued and have underscored the point that genuine social development was not a necessary outgrowth of economic development. Admittedly, several countries have made efforts in the last few years to enhance people's participation and human resources mobilization and development. However, faced with the challenges of the recent crisis and current recovery, all African States need to consider and establish a suitable balance between their economic and social policies. The two sets of policies need to interact in a dynamic and mutually supportive relationship within an integrated planning process which must develop in an increasingly democratized political context.

3/ For further discussion on this, see ECA Social Policy, Planning and Research Section, "Social policies and programmes in the context of Africa's economic recovery and accelerated development" (ECA/SD/87/2.1/a, 1987); E.O. Akeredolu-Ale, "The human situation in Africa today; A review" (ECA/ICHD/88/2), paper prepared for the International Conference on the Human Dimension of Africa's Economic Recovery and Development, Khartoum, the Sudan, 5 to 8 March 1988; Reginald H. Green, "The human dimension as the test of and a means of achieving Africa's economic recovery and development: Reweaving the social fabric, restoring the broken pot", paper prepared for the International Conference, Khartoum, the Sudan, 5 to 8 March 1988.

III. THE IMPACT OF POPULATION

16. Three aspects of the demographic profile and dynamics of African countries will be highlighted here as they have impinged greatly on the socio-economic development of the region in the mid-1980s. These are rapid population growth, high fertility and uneven patterns of population distribution by age and space. While there have been moderate declines in Africa's mortality rates since the 1960s fertility levels have not declined. This has resulted in the rapid population growth which averaged 3.0 per cent per year in 1980-1985. As can be seen from table 1, there are subregional variations. Population growth rates and mortality levels are highest in two subregions, West and East and Southern Africa, and lowest in the North African subregion. Compared to other regions of the world, the mortality levels of all subregions in Africa are still high. The component of infant and child deaths reached most disturbing levels in 1983-1985 mainly as a result of the drought emergency. Thus, in 1983 the United Nations Children's Fund (UNICEF) recorded infant mortality rates of 100 to over 150 in all but 13 of the ECA member States. In 1984, 9 out of the 10 countries in the world with the highest under-five mortality rates (U5MR), namely over 250 per 1000 live births, were found in Africa. The following year, 27 member States were reported to have U5MR of between 178 and 302. 4/ However, it is likely that most of these heavy losses would be made up by the high fertility since the projections for population growth in 1985-1990 (table 1) do not show a lowering or stabilizing trend.

17. The low life expectancy of 50 years in 1985 represents a considerable loss to Africa in human-years and investment, not to mention the human suffering, unfulfilled hopes and expectations. At the same time rapid population growth has contributed to such serious social problems as food scarcity, ecological degradation, excessively large labour forces and inadequacies in health, education, housing and other social services. In the light of recurring drought in many countries, even in the short period between 1984 and 1987, and in view of the growing desertification, population pressure on arable and marginal lands raises the question of the long-term sustainability of Africa's development.

18. High fertility and high infant and child mortality generally create a vicious circle which can only be broken by sustained improvement in childrens' chances of survival and the amelioration of the basic socio-economic conditions in which the circle develops. High fertility derives from a complex mixture of factors including culture and tradition, early and almost universal marriages, the large and relatively young segment of the population of child-bearing age, limited use of modern contraception, the relatively low status of women and poverty. These issues need to be appreciated more by policy-makers and development planners.

4/ UNICEF, Annual Report, 1985, pp. 26-27; Annual Report, 1986, pp. 28-29; Annual Report, 1987, pp. 28-29.

Table 1. Major demographic indicators by subregions

	Crude birth rate per thousand population		Crude death rate per thousand population		Annual population growth rate (percentage)		Infant mortality rate per '000 live births		Life expectancy at birth (years)
	1982	1986	1982	1986	1980-1985	1985-1990	1982	1986	1986
North Africa	39.3	37.6	12.3	10.9	2.8	2.6	100	89	59
West Africa	49.2	49.2	18.3	17.0	3.2	3.4	123	115	49
Central Africa	44.1	43.9	17.0	15.9	2.8	2.9	113	106	50
East and Southern Africa	50.2	50.2	18.8	17.7	3.1	3.2	104	97	49
Total Africa	46.5	46.0	16.9	15.6	3.0	3.1	110	102	51

Source: ECA secretariat

19. The uneven age distribution, with at least 40 per cent of the population under 15 years and less than 4 per cent over 64 years, has at least four serious social consequences. First, the dependency ratio of 92.9 per cent and its burden on the working people are not only great but also limit their capacity to save and make productive investments. Secondly, the large young population places very high demands on educational, medical and other social services. For instance, 3 per cent growth in the school age population, would require a doubling of school facilities every 20 years just to maintain present enrolment rates. Thirdly, large cohorts of graduates and school-leavers enter the labour force each year who cannot be absorbed easily due to the diminished growth of the economy. Such a situation aggravates unemployment and underemployment unless countries have the resources and are able to organize, train, equip and utilize the new entrants in productive activities.

20. Fourthly, with the general deterioration of the rural areas in most countries, the youth especially have been migrating to towns or out of their countries to seek a better life. In 1983-1984 the mass migrations were seen by many in terms of survival. While many found relatively better conditions, expanded their horizons and remitted money to support their families back home, the social consequences were not uniformly positive. Family life was affected as young families were often separated for long periods; some migrants suffered discrimination and in fact worked only in menial and unenlightening jobs; and many lived in refugee-like conditons in foreign countries without the benefit of official refugee assistance. When difficulties arose, some were repatriated from their host countries sometimes in disturbing circumstances which threatened the goodwill and co-operation between member States.

21. None of the issues highlighted above can be dealt with in isolation and outside the framework of overall development planning. Therefore, it is noteworthy that the perceptions of ECA member States of the relationships between population and development have been changing especially since the adoption in 1984 of the Kilimanjaro Programme of Action on Population and Development (KPA). Approaches to the population question and government interventions of course differ with the countries but by 1987 most States had adopted one set or a combination of the following: explicit or implicit policies to reduce population growth especially through integrated and more equitable health systems with emphasis on mother and child health/family planning programmes and through the improvement of the status of women (20 countries); policies to influence fertility levels (25 countries); policies to influence mortality especially of infants and children (46 countries); and policies to ameliorate the spatial population distribution (36 countries). 5/ Some efforts have also been made with respect to internal and external migration but the situation needs continuous monitoring and co-operation and understanding among States. It is certainly difficult to

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5/ See, ECA, Population Division, Planning and Policies Section, "African experience in the implementation of population policies" (ECA/WP/POP/1987/1.2(ii).

determine the necessary balance to be maintained between population growth and development as this depends on complex personal, social, cultural, economic and political factors. Therefore, broad-based national consensus is required to evolve overall population policies to ensure efficient human, social and economic development.

IV. INCOME, EMPLOYMENT AND POVERTY

22. Major changes in the social situation between 1982 and 1987 were reflected in the areas of income, employment and poverty. On the whole, African countries experienced steady declines in per capita income in the period, although there was some improvement in output growth in 1985. As has been recently suggested, the regional output growth rates of 1.2 per cent in 1986 and 1.5 per cent in 1987 are hardly "what will take the African economy up the hill of economic stagnation into the recovery slope". 6/ Such slow-down in economic activity, the financial crisis and consequent reduction in public spending, the strong focus on debt and debt payments and the models of structural adjustment adopted by the majority of African countries have aggravated the situations of income, employment and poverty.

23. Data on incomes, employment and poverty are fragmentary and are subject to variations of definition. Also most data are not sufficiently disaggregated to unmask the qualitative dimensions, scope and intensity of variables. Nevertheless, the available evidence suggests that with the drastic declines in aggregate African income levels in the mid-1980s, the problems of disparities worsened. Thus, it is not uncommon now to find in some countries the top 20 per cent of the socio-economic groups earning 60 per cent of the total income, and the vary top 10 per cent appropriating 45 per cent. On the average, real wages in the region fell by about 7 per cent per annum between 1980 and 1984, but some countries such as the Sudan, Somalia, the United Republic of Tanzania, Ghana, Sierra Leone and Uganda had rates of 12, 14, 16, 17, 18 and 26 per cent respectively. 7/ The income losses have hit the poorest income groups the hardest. The structural adjustment programmes (SAPs) which have given prior attention to macro-economic balances and the external financial position of most countries rather than to the social and distributional aspects of development have also aggravated the problem of income concentration.

6/ Adebayo Adedeji, "A preliminary assessment of the performance of the African economy in 1987 and prospects for 1988", (January 1988), p.4.

7/ ILO/JASPA, "Recent trends in employment, equity and poverty in African countries", (ECA/ICHD/88/25) paper prepared for the International Conference, Khartoum, the Sudan, 5 to 8 March 1988, tables 7 and 8; ILO/JASPA, Impact of recession in African countries: Effects on the poor, synthesis report (Addis Ababa, 1985), pp. 76-78.

24. While measurements are difficult, one estimate shows that on the average the ratio of urban to rural incomes is 4:1 and the gap is widening. 8/ However, it should be understood that geographic income groups are not homogenous. Many areas comprise rich large commercial farmers and all urban areas have poor, unskilled marginal workers with very low incomes. What has affected the income situation for most rural households is the continued neglect of agriculture, especially the subsistence sector, and the low level of public investments in inputs and social services in the rural areas. Since over 70 per cent of the population lives in the rural areas and the whole population has a young demographic profile, rural incomes can remain structurally depressed for a long time unless definite political commitments are made and effective strategies are adopted to transform the rural sector and enhance the employment capacity of agriculture and agro-based industries in line with Africa's Priority Programme for Economic Recovery, 1986-1990 (APPER).

25. Employment, broadly-defined, is the principal means through which most people in Africa obtain their incomes. The trend in productive employment in the region has been downward since 1980 but by 1985 the size of the labour force had been growing at an average rate of 2.6 per cent per annum. 9/ The new entrants were mainly young graduates, women, school leavers, drop-outs and rural youth. In two subregions, North and Southern Africa, it is noteworthy that the female labour force has been growing much faster than the male - about 60 per cent faster in the former case. 10/ This trend has been due mainly to policies to promote women's integration in the development process in the two subregions and to the high rate of male emigration in the Southern African countries. However, it should be pointed out that female labour force participation rates are more often indicative than conclusive since there are methodological deficiencies in classifying a great deal of women's work. Table 2 shows the changes in the levels of the economically active population and the crude activity rates of the different subregions between 1982 and 1986. Except for North Africa, the crude activity rates have been falling since 1982.

26. The employment situation in the continent is precarious. The predominant sector of the economy, agriculture, which employed over two-thirds of the labour force and over 80 per cent of working women, except in North Africa, in 1986 (see table 3), is in serious decline. Industry has yet to be reoriented towards labour-intensive strategies, and the large so-called informal sector is characterized by marginalization and low productivity. Recurring drought and national calamities in many Sahelian and East African countries have also destroyed the income and employment base of many peasants

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8/ Ibid, p.82.

9/ ILO/JASPA, "Recent trends in employment", op.cit., pp. 5-10.

10/ ECA, Survey of Economic and Social Conditions in Africa, 1985-1986 (E/ECA/CM.13/3), pp. 162-163.

Table 2. Economically active population and crude activity rates by sex

Subregions	Economically active population (in thousands)						Crude activity rate (%) *					
	Both sexes		Male		Female		Both sexes		Male		Female	
	1982	1986	1982	1986	1982	1986	1982	1986	1982	1986	1982	1986
North Africa	32 145	36 182	27 677	30 913	4 468	5 269	27.85	28.15	47.60	47.65	7.80	8.30
West Africa	64 055	69 550	39 864	43 875	24 191	25 675	41.20	39.70	51.60	50.60	31.05	29.05
Central Africa	24 754	26 921	15 112	16 657	9 642	10 264	42.70	41.50	53.00	51.95	32.65	31.30
East and Southern Africa	68 803	76 260	39 811	44 700	28 922	31 560	45.40	44.15	53.10	52.10	37.80	36.30
Total Africa	189 757	208 913	122 464	136 145	67 293	72 768	39.55	38.70	51.30	50.55	27.95	26.85

* The crude activity rate is defined as the percentage ratio of the economically active population to the whole population.

Source: ECA secretariat.

Table 3. Economically active population: sectoral distribution (percentage)

Subregion	Male						Female					
	Agriculture		Industries		Services		Agriculture		Industries		Services	
	1982	1986	1982	1986	1982	1986	1982	1986	1982	1986	1982	1986
North Africa	46.20	43.00	21.5	22.8	32.4	34.3	43.1	40.4	21.4	22.7	35.6	37.0
West Africa	68.8	67.1	12.8	13.4	18.4	15.6	73.1	71.8	6.3	6.8	20.6	21.5
Central Africa	65.4	62.7	14.4	15.7	20.3	21.7	90.3	90.1	1.8	1.9	7.4	8.1
East and Southern Africa	73.7	71.8	10.5	11.1	15.9	17.2	88.4	87.0	3.1	3.5	8.6	9.6
Total Africa	65.0	62.7	14.2	15.1	20.9	22.3	80.3	78.7	5.3	5.8	14.5	15.6

Source: ECA secretariat.

and rural workers. These factors have produced an overall deterioration in employment opportunities, with growing unemployment and underemployment in the urban and rural areas, respectively. It is estimated that open and disguised unemployment increased by some 8 per cent between 1980 and 1985 and urban unemployment rates were 30 per cent in the mid-1980s compared to 10 per cent in the 1970s. 11/ In the rural areas, demographic and ecological factors have produced landlessness, uneconomic fragmentation of land and cultivation of marginal lands resulting in further degradation, reduced productivity and underemployment.

27. The qualitative aspects of the employment problems are important for social development. Of the vast number of unemployed people, the most vulnerable are the urban youth and rural-urban migrants. Faced with the realities of the saturated urban employment markets these two categories of people compete mainly in the informal sector leading to a proliferation of unproductive activities. Their low and restricted income opportunities in the face of rising prices of consumer goods and their relative idleness can become a social menace. Crime, juvenile delinquency and drug trafficking are problem areas becoming associated with these categories of the population more than ever before. On the other hand, it must be noted that some rural-urban migration has had salutary effects on the incomes of many rural families and households. Urban-rural remittances in Kenya and Malawi, for instance, were reported as exceeding 10 per cent of the total incomes of some villages in 1982. 12/ This underscores the strong social and cultural ties between African urban and rural families.

28. Recent studies by ILO/JASPA have also shown that women entrants into the labour force face discrimination in the tight employment market. 13/ Where the women are heads of households and lack credit and other inputs, their continued unemployment or underemployment has a serious impact on the welfare of their families. In many cases too, the young unemployed and underemployed have been forced to remain dependent on their families, particularly their mothers, long after they should have been self-supporting. Thus, the dependency burden increases for the families and the self-respect of the old dependents is undermined.

29. A major effect of current structural adjustment programmes on employment has been their near universal reduction of public, and in some cases, private sector employees. Given the labour-surplus and slow-growing economies of Africa, such reform measures were bound to impose immediate hardships. Alternative employment opportunities are difficult to find. Moreover, the profiles and orientations of many retrenched public servants do not make

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11/ ILO/JASPA, "Recent trends in employment", op.cit., p.9.

12/ World Bank, World Development Report 1982 (Washington, D.C.), p.78.

13/ ILO/JASPA, Impact of recession in African countries, 9.75.

them particularly suitable for self-employment in the private sector. Realizing this, some countries such as Ghana have incorporated job training and placement schemes in their redeployment programmes under the SAP. Other countries such as Côte d'Ivoire, Liberia and Sierra Leone have used other measures such as salary reductions, early pension and reductions in social sector expenditures to try to achieve the financial stability sought under the SAPs.

30. Several countries have also taken steps in recent years to promote employment and create special institutions for that purpose. For example, in 1982, Kenya appointed a Presidential Committee on Unemployment and established a National Employment Bureau in 1987. The United Republic of Tanzania passed a Human Resources Deployment Act in 1983 and established a scheme to promote productive employment in rural and urban areas. Côte d'Ivoire has laid emphasis on informal sector development within a National Employment Policy declared for the decade 1985-1995. Nigeria appointed a National Committee on Strategies for Dealing with Mass Unemployment in 1986 and established a new Directorate of Employment with a focus on youth self-employment. These new directions in employment policy are pointing to the need for fundamental changes especially to achieve rural transformation and improve informal sector development, as areas with the greatest potential to relieve the employment problems.

31. With regard to poverty, it is generally believed that the crisis and drought of 1982-1984 and structural adjustment policies have increased its incidence and prevalence. The available indicators are the worsened conditions of malnutrition, infant mortality, stunted growth of children and morbidity and mortality of mothers. Estimates by the World Bank show that 50-75 per cent of the African population in 1985 was living in poverty. 14/ Identification of the poor is not easy since a socially meaningful definition of poverty must take into account the norms and values of particular societies and cultures. Also, the poor are not a homogeneous social group. Nevertheless, it is generally accepted that poverty defines the condition of insufficient income or "exchange entitlements" of some people to meet their basic needs in food, clothing, shelter, health care, etc., and to live at a standard widely regarded as satisfactory within their society. Poverty therefore denotes a condition of deprivation and not just a state of inavailability of goods and services. As such, it is linked to the persistent inequalities in access to and distribution of income and other productive resources.

32. The poor whose plight requires the greatest attention from policy-makers include displaced victims of drought, natural disasters and war, small farmers and pastoralists in remote rural areas, women heading households with marginal incomes, landless or unskilled rural workers, urban wage earners, the informal sector labour force, and the chronic poor who dwell in urban slums and shanty-towns. Such poor people cannot compete for income under the SAP trade liberalization or foreign exchange modifications, yet they face increasing

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14/ Quoted in ILO/JASPA, "Recent trends in employment", op.cit., p.13.

prices in food, medicines, kerosene, transportation and other essential goods and services just like the better-off segments of the population. This makes their position highly vulnerable. At the height of the economic crisis in 1983-1984, many of their young and old members were reduced to begging.

33. At least two member States, Côte d'Ivoire and Ghana, are currently undertaking comprehensive national living standards surveys to identify the problems and resources of their people, especially the poor, in order to plan short- and long-term measures to improve their conditions. Other member States are urged to consider similar surveys to provide the data and information upon which policies can be formulated. In Ghana where the SAP has restored a considerable level of economic growth but has caused serious social problems, the Government has undertaken an intensive exercise to design short- to medium-term compensatory measures for the poor and vulnerable groups in its Programme of Actions to Mitigate the Social Costs of Adjustment (PAMSCAD) due to be implemented from 1988. However, in all countries, the progressive alleviation and eventual eradication of poverty would require major efforts at socio-economic transformation and genuine political commitment to put the poor first in development.

V. FOOD, NUTRITION AND HUNGER

34. The most compelling picture left in the minds of most people in Africa and the world in 1982-1985 was that of famine, starvation and death suffered by hundreds of thousands of obviously poor and vulnerable Africans. Although the very severe drought magnified this spectre of misery, the lack of equilibrium between population growth and food production, between agricultural policy, agricultural technology and related investment on one hand and food self-sufficiency on the other hand had been developing for at least a decade before. In a profound way, the socio-economic crisis was a reflection of the failure to develop the rural sector which provides habitat, employment and income to over 70 per cent of the African population. Annual food production dropped while the population grew steadily resulting in falls in the food self-sufficiency ratios. By 1980 each African had about 12 per cent less home-grown food than in 1960. As the African Governments themselves succinctly analysed and concluded in 1986, the cumulative result was that one out of every five Africans depended for his/her survival on food imports, about 25 per cent of which was provided by food aid. 15/

35. With improved rainfall in 1985/1986 agricultural production rose at a rate slightly more than the population growth rate. Many countries passed from the relief to the recovery stage and some countries even had the problem of how to manage their food surpluses. 16/ But better agricultural performance

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15/ OAU/ECA, Africa's Submission to the Special Session of the United Nations General Assembly on Africa's Economic and Social Crisis (OAU/ECA/2XV/Rev.2, E/ECA/ECM.1/1/Rev.2), 1986, p.5.

16/ See, ECA/ADB, Economic Report on Africa 1986 (March 1986), p.6; Adebayo Adedeji, "A preliminary assessment of the performance of the African economy in 1986 and prospects for 1987" (Addis Ababa, 2 January 1987), p.2.

in a single year or season should not lead to complacency. Zones of concern remained in countries such as Botswana, Ethiopia and Mozambique and 1987 saw the recurrence of drought and food emergencies in these and other countries. The fundamental problems still exist such as the correlation between poverty, income disparity and famine. As, an FAO study on Africa in 1982 observed, "recent famines in at least some parts of Africa have been exasperated by inadequate government concern for more egalitarian income distribution". 17/

36. Food is so vital to the social and economic wellbeing of a people that no society should be so vulnerable in respect of this basic resource. The first area threatened by food shortages is the nutritional status of the people. But other factors also play a part. The structure of food distribution in a society or the accessibility of people to it is as important as the aggregate food supply or availability. Besides, poverty, ignorance and certain cultural practices and food habits contribute significantly to the problems of poor diet, malnutrition and undernourishment, particularly among children, pregnant women, nursing mothers and the poor. Furthermore, one of the consequences of urbanization and the structural changes in the African economies, especially the decline of agriculture (food sector) and the growth of the informal sector, has been that the number of people who produce all the food they need is decreasing while that of those people who must buy their food requirements is increasing. Urbanization, food import policies and the educational system have also influenced tastes and consumption patterns so that there has been a growing preference for foreign foods.

37. More than ever before food consumption is linked to employment and income opportunities. Therefore, negative changes in employment and income are bound to affect nutritional status. There is some evidence to show that current structural adjustment programmes have exacerbated malnutrition, especially of the poor, in many countries. By reducing employment and income earnings, by removing food subsidies and increasing the price of food and basic commodities, sometimes by as much as 50-100 per cent, SAPs have forced many poor Africans to lower their food, particularly protein, consumption. Poor households which spend up to two-thirds of their income on food, have been forced to reduce their nutritional intake and thus endure hunger. In many countries, small farmers in drought-prone areas or marginal lands with no adequate storage facilities have faced severe problems of malnutrition. Their low purchasing power or exchange entitlements especially in the lean farming seasons have made it almost impossible for them to buy food in the inflated markets to make up their household shortfalls.

38. Using the limited available statistical data and information about trends in employment, incomes, food aid and food distribution, United Nations assessments have shown that before the 1982-1984 emergency 26 per cent of the total population of Africa was undernourished or malnourished. This

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17/ Quoted in Saad Morcos, "Rural development in Africa: A retrospect", paper presented to the United Nations Interregional Seminar on Integrated Rural Development, China, 16 to 31 August 1984.

was the highest percentage among the developing regions and Africa had replaced South East Asia in dietary deficiency. 18/ The situation evidently worsened with the drought when 150 million people in 24 countries were affected, 30-35 million of them critically. Another 10 million people left their lands and homes in search of food and water. The effects of these developments on children should be a matter of serious concern and research. Malnutrition in children leads to high mortality, stunted growth and poor capacity for a creative and productive working life in adulthood. This is what makes some of the recent statistics disturbing. For example, UNICEF and World Bank studies show that for 19 selected countries as many as 14 per cent of the children born in 1982-1983 were below normal weight (2.5 kg) at birth. On the average 43 per cent of children under five years of age were estimated to be suffering from moderate to severe malnutrition. 19/ Under five mortality had increased between 1982 and 1985 as already noted in section III. The situation in the States of Southern Africa affected by apartheid, war, destabilization and drought was also alarming according to fragmentary evidence available. 20/

39. From the point of view of social development, the main policy issues of food and nutrition that need to be tackled include: accelerated development and income-generation in the rural sector; genuine participation of the people in decision-making, formulation and execution of development projects; improvement in income distribution especially between the urban and rural areas; equity and careful targeting of food distribution and food subsidies to those in need. Technological improvements, extension services marketing and credit schemes for rural development should be accessible and adapted to local conditions and users. Since women constitute nearly 80 per cent of agricultural workers, and many rural households are headed by women, on-the-farm and close-to-home programmes of work- and self-improvement need to be developed and implemented to enhance their productivity and incomes.

40. There is some evidence to suggest that the traditional urban bias of development policy-making is being lowered in many countries. The sharp aggravation of poverty for the rural communities under SAPs has led governments to consider short- to medium-term compensatory measures or to abandon some SAP measures altogether. The PAMSCAD experiments in Ghana already mentioned is an important compensatory effort. Zimbabwe doubled credit to small farmers from 17.4 per cent in 1982/1983 to 34.7 per cent in 1985/1986. Botswana developed a relief programme to provide employment in infrastructural projects which employed some 74,000 workers who were able to replace 37 per cent of

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18/ United Nations, Living conditions in developing countries, pp. 36-37.

19/ UNICEF, The State of the World's Children, 1987; World Bank, World Development Report 1987 (Washington, D.C., 1987).

20/ See UNICEF, Children on the Front Line: The Impact of Apartheid, Destabilization and Warfare on Children in Southern and South Africa (New York, 1987).

their income lost through crop failure in the drought of 1985/1986. 21/ Several countries have also adopted supplementary feeding programmes and child survival strategies for the poor and rural communities. These efforts are directed towards what UNICEF has called "adjustment with a human face". However, a real challenge still exists for policy-makers and planners to link the short- and medium-term human focused measures to long-term development goals and strategies.

VI. THE PRODUCTION OF HEALTHY PEOPLE

41. Improvements in the African social situation depends critically on the development of healthy human beings. This in turn depends on the socio-economic conditions, orientations to equity and the degree of integration of health and other social policies and programmes in the planning processes in various countries. There is a close correlation between economic growth and improvement in the health status of the population of a country; but, without a determined social policy good health will not flow automatically from economic development. As already noted, in the 1960s and 1970s, African countries made considerable progress in health development through the expansion of health facilities, improved water supply, housing, environmental sanitation, development of mother and child health (MCH) programmes and the control of endemic diseases. However, the pace and quality of these changes were seriously affected by the fundamental socio-economic distortions manifested in mass poverty, illiteracy and inequitable distribution of the benefits of development.

42. Although there are limitations in aggregate national social indicators, a number of sensitive ones reveal the present unsatisfactory health status of the African population and of particular social groups. According to a 1985 assessment, only three ECA member States, namely Mauritius, Sao Tome and Principe and Tunisia, had a life expectancy at birth of more than 60 years, that is, 67, 62 and 61 years respectively. The majority of member States (30) representing 60 per cent had a life expectancy at birth of less than 50 years. 22/ As indicated in section III, infant mortality (IMR) and under-five mortality rates (U5MR) in the region are the highest in the world. Many of the deaths are caused by vaccine-preventable diseases such as neonatal tetanus, measles and whooping cough (pertussis) as well as diarrhoea and visible and invisible malnutrition. In Southern Africa, the apartheid-inspired wars and destabilization in the 1980s have produced in Angola and Mozambique an estimated IMR of 200 per 1000 live births, the highest in the world except for Afghanistan. 23/ Another sensitive health indicator, maternal mortality rate, shows unacceptably high levels. In 1982 most countries in Africa were

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21/ UNICEF, Adjustment with a human face, Summary of Part II of the State of the World's Children 1987, (New York, 1987)p. 96.

22/ ECA, Survey of Economic and Social Conditions, 1985-1986, p. A-8, table 1.

23/ UNICEF, Children on the Front Line, p. 12.

losing as many as 11 mothers per 1,000 live births compared with 10 in South Asia, 9 in Oceania and 5 in Latin America. 24/ Problems of adolescent fertility and pregnancy-related morbidity and mortality of young women appear to be rising in several African countries. Such problems are associated with conditions of poverty, ignorance and lack of access to necessary services. They also reflect the weakening of the family as a social support institution.

43. The disease picture in Africa is equally disturbing. The incidence and prevalence of the six childhood killer or disabling diseases, vector-borne diseases such as malaria, trypanosomiasis and onchocerciasis and water and sanitation-related diseases including diarrhoea and cholera seem to have been aggravated in the 1982-1987 period. Even debilitating and endemic diseases which had been eliminated or brought under considerable control in the 1960s and 1970s have re-emerged. Thus, WHO and UNICEF reported local epidemics of cholera, malaria, yellow fever, yaws and worm infestations, especially among primary school children, in several countries. The social impact of such serious illnesses are repeated suffering, incapacity, loss of energy, vitality and productivity. Fragmentary data available also indicate an increasing trend in disability due to the recent drought, famine and continuing civil wars and political instability. It was for this reason that the OAU in collaboration with ILO and ECA established the African Rehabilitation Institute for Disabled Persons (ARI) in 1984 to assist member States to deal with this problem.

44. Health-care resources and facilities in nearly all countries in the region are inadequate. Where the indicators show an upward trend, great shortfalls still exist in the light of the fast-growing population and poor distribution patterns. UNICEF and World Bank data for 19 low- to middle-income countries show a slight improvement in the ratio of population to physician from 26,000 in 1974 to 23,000 in 1981. This is quite high compared to the WHO recommendation of 12,000 people per physician, but there are marked country variations. Egypt, for example, had about 760 persons to a physician. The ratio of population to nurse improved more significantly in that period from 4,300 to 2,400, with again wide country variations. 25/

45. There is, of course, no necessary correspondence between the improved ratios of physicians, nurses or hospital beds and the enhanced wellbeing or life expectancy of a people unless there is an adequate supply of essential drugs, equipment and logistic support, as well as improvements in income levels and the distribution of medical and health personnel and services. For these reasons, health care in most rural areas is often illusory. The concentration of doctors in urban areas, and particularly capital cities,

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24/ WHO, Evaluation of the Strategy for Health for All by the Year 2000: Seventh Report on the World Health Situation, vol. 1, global review (1986), p. 75, table 1.

25/ Cited in Akeredolu-Ale, "The human situation in Africa today", op.cit pp.10-11, table 7.

is a common phenomenon. For example, an ILO/JASPA mission reported that in the Sudan, in 1985, 95 per cent of the country's doctors worked in urban centres where only 20 per cent of the population lived. Sixty per cent of the doctors were concentrated in Khartoum, the capital city, which had only 20 per cent of the hospital beds. 26/ Although urban hospitals serve as essential referral and, sometimes, teaching and research hospitals, access to them is generally restricted for the poor of the rural and peri-urban areas. Their health development depends more on traditional healing practices and institutions.

46. Many diseases in Africa can be controlled not just through medical or therapeutic interventions but also through improvements in water supply and sanitation, especially in rural and periurban areas, and through effective health education. For the vast majority of the African people the health question requires a developmental solution in terms of adequate food production and distribution, provision of basic needs including decent shelter and sound environmental protection policies. The issues of shelter, water and sanitation are discussed in the next section under the human settlements question.

47. A point deserving serious consideration is the orientation of health services. As is well known, all African countries have inherited Western traditions of health care with a strong urban bias and based on hospitals and other health institutions which are heavily dependent on expensively trained, highly skilled personnel and equally expensive imported equipment. While these facilities and services are important for the treatment of particular medical problems, their appropriateness and relevance can be socially limited. Based as they are in the urban areas, they absorb over 60 per cent of the total health budget of most countries, and serve mostly the needs of the socially and economically powerful. Thus, the hospital-based health system aggravates social inequalities. For the majority of the African people the most effective approach would be primary health care (PHC) which is based more on equity considerations and encompasses intensive local community involvement, and low-cost but effective health technologies.

48. The WHO Regional Office for Africa (WHO/AFRO) has estimated that to achieve health for all by the year 2000, the additional annual expenditure per capita would be $US 16.20 if the conventional hospital system is adopted, but only $US 2.60 if the participatory PHC approach is used. 27/ Although the data are incomplete, some trends show that Africa, more than other regions, tends to cut its health budgets first in periods of economic crisis, thus rendering the hospital-based health care system even more ineffective. The austerity measures and structural adjustment programmes have generally led

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26/ ILO/JASPA, "Recent trends in employment, equity and poverty", op.cit., p.14.

27/ WhO Regional Office for Africa, Final Report of the Thirty-fifth Session of the WHO Regional Committee for Africa held in Lusaka, Zambia, 11 to 18 September 1985, p.119.

to drastic cuts in imported drugs, supplies, equipment and transportation, cost recovery for available drugs and services, salary freeze and deteriorating working conditions. Nearly half of the African countries are reported to have reduced their health expenditure in the crisis years. For example, per capita health expenditure in Kenya fell by 26 per cent between 1980 and 1985. In Ghana the fall was 80 per cent from 1974 to 1982. In Liberia the allocation for drugs fell by 35 per cent from the fiscal year 1981/1982 to 1982/1983. In Madagascar, Senegal and Somalia per capita social expenditure fell by 44, 48 and 62 per cent respectively between 1980 and 1986. 28/ As funds are released by such measures primarily to service Africa's external debt, the social impact has generally been a worsened health status for the poor and vulnerable groups, drop in clinic attendance by one-third or more, decay of medical facilities, demoralization of health personnel and a catastrophic exodus of qualified health manpower from the continent.

49. But, there are a few examples which show that Governments can meet some of the above challenges at least in the short and medium term by determined social policy and careful targeting of social action especially for the most vulnerable. Thus, Zimbabwe managed to increase its budget for primary health care in the midst of the drought and recession. It significantly reduced its recurrent expenditure for defence and administration from 44 per cent in 1980 to 28 per cent in 1984, and increased the share of preventive health measures from 7.6 per cent to 14 per cent of the overall health budget. 29/ Through community action Burkina Faso managed to vaccinate 60 per cent of all its children at a minimal per capita cost in the critical time of drought and adjustment. Botswana's comprehensive drought relief scheme of 1985/1986 has focused on supplementary feeding and health and nutrition programmes for all disadvantaged groups. The programmes have benefitted 678,000 people or 62 per cent of the population. Ghana's new Programme of Actions to Mitigate the Social Costs of Adjustment has an important health component for the supply of essential drugs, food and nutrition and the health maintenance of primary school children.

50. From such initiatives, lessons may be learnt to facilitate restructuring and reallocation in the health and other social services to enhance the production of healthy people for Africa's development. A rethinking of policies and approaches seems necessary within an intersectoral framework and integrated socio-economic planning process in which the issues of social equity and economic efficiency are carefully weighed. Due attention must be given to the implementation of district and local, community-based health care systems as advocated by the 1987 OAU Declaration on Health as a Foundation for Development. Development agencies of the United Nations system and the international community must strengthen their intersectoral co-operation to focus on equity and health promoting programmes. Regional and subregional

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28/ UNICEF, Adjustment with a uman Face, op.cit., p. 93; ILO/JASPA, "Recent trends in employment", op.cit., p.13.

29/ Ibid., p.98.

co-operation is also important, for instance, in the areas of local manufacture of essential drugs, research, development and use of African traditional medicine and health practices, monitoring and control of diseases and health hazards caused by ecological degradation and population migrations.

VII. WHERE THE PEOPLE LIVE AND WORK

51. Human settlements are the physical and social context in which human activities take place. The sector was seriously affected in the 1982-1987 period. The economic and ecological crisis as well as socio-political tensions led to the destruction of substantial shelter (housing) stock especially in rural areas and replacement has been a slow process. The large displacement of populations has reinforced the existing strong trend of rural-urban migration and rapid urbanization. In most cases the enormous pressure of demand for housing and ancillary facilities has frayed the urban fabric and plunged many cities into crisies of unprecedented dimensions.

52. Urban growth has often preceeded the establishment or expansion of a solid diversified economic base to support the housing and employment demand. Between 1982 and 1987, 35 major African cities increased at a rate which would be doubling their population size every nine years. During that period, there were 28 cities of over one million inhabitants, where just 20 years before, there were only three. The continent is therefore being forced to urbanize and house more people within a much shorter span of time than did either Europe or the United States of America over their whole urbanization history. Shelter and essential services have not improved quantitatively fast enough to take adequate care of this rapid growth in the African urban population. The continent still produces far below the United Nations recommended output rate of 10 housing units per 1000 population. Room occupancy rates still average above 2.0 persons and a substantial proportion of urban residents live in densities of 3 to 4 persons per room. 30/ In some cities in North Africa, the urban densities are much higher. Such overcrowding, has led to serious rapid deterioration of existing conventional housing.

53. Human settlements conditions improved gradually from the 1970s to the 1980s but the problems of access to affordable housing have worsened in most countries because of the decline in public housing development programmes, the escalating cost of housing construction and the reduction in the real purchasing power of most households. Much of the hitherto "surplus-for-investment" of households must now go towards food, health care and education costs. Indeed, in the present conditions of high inflation and economic uncertainty, urban land has become one of the safest domestic investment areas and a haven for the surplus income of the well-to-do. This has pushed up urban land prices which, together with the high cost of imported building materials, have made new urban housing units too costly for most families.

30/ United Nations Centre for Human Settlements (Habitat), Global report on human settlements 1986, p.77.

54. In 1981, before the crisis reached its climax, between 30 and 70 per cent of the African population were considered unable to afford the conventional low-cost housing. 31/ Paradoxically, at present, sections of some cities have substantial housing stock with high vacancy rates, especially for self-contained houses, because of their high quality construction standards and consequent high rental prices. At the same time, there are acute shortages of rooming and apartment units for the majority of urban dwellers. The shortage of affordable shelter has continued to encourage inner city slums and massive developments of unregulated buildings on the outskirts of many cities. Such developments have often incurred the wrath of some governments, leading sometimes to demolitions, in spite of the fact that this category of shelter houses an estimated 60 per cent of the population of many African cities.

55. The health, wellbeing and general quality of life of citizens in human settlements depend to a large extent on the service level achieved in the provision of wholesome water for drinking and other personal and domestic uses as well as for the disposal of wastes. The World Bank has estimated the basic needs of each human being to be 20 to 50 litres a day of safe and convenient water for these purposes. 32/ Very few African countries have met the minimum threshold of 20 litres of water per capita. Table 4 shows that as of 1983 only about 38 per cent of the African population was served by convenient water supply and about 29 per cent by sanitation facilities - a dominant proportion of these being in the urban centres. In the rural areas of many Sahelian countries only between 5 and 15 per cent of the population have access to drinking water and probably less than 5 per cent have any access to any form of sanitary disposal facilities. Also, the large markets of nearly all African cities are particularly deficient in sanitation facilities, and have become breeding places for various diseases, especially for young children who are taken by their mothers to these markets.

56. From the point of view of public policy, most Governments in Africa seem to have recognized the importance of upgrading the rural hinterland in terms of the provision of basic physical and socio-economic infrastructures and services for feeder, access and service roads, pipe-borne water, electricity, health and education. Rural development programmes have also been given high priority in the national development plans of many countries. However, allocation of resources for and actual implementation of these rural development programmes still lag seriously behind stated policy goals. Most governments concentrate their administrative and industrial investments, resources and facilities in the large and capital cities. This increases the power of these cities to attract ever-growing numbers of rural migrants, thus further weakening the socio-economic position of the rural areas. Genuine

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31/ ECA, "Shelter: Housing the low income group in Africa" (ST/ECA/HUS/2), 1981, p.11.

32/ World Bank, Water supply and waste disposal, Poverty and Basic Needs Series (September 1980).

Table 4. Water supply and sanitation coverage: Urban and rural Africa, 1980 and 1983 (population in millions)

	Population		Water supply				Sanitation			
	1980	1983	1980		1983		1980		1983	
			Pop. served	%	Pop. served	%	Pop. served	%	Pop. served	%
Urban	135	160	89	66	91	57	73	54	88	55
Rural	334	356	76	22	103	29	67	20	64	18
Total	469	516	162	34	194	38	140	29	152	29

Source: Extracted from UNCHS (Habitat); Global Report on Human Settlements 1986, p.79, table 5.19.

rural development therefore must reflect a commitment to realize the development potential of the rural hinterlands, especially those that are socially, economically and ecologically disadvantaged. The relationships between cities and villages must also be reoriented and resources and services transferred to the latter to promote equity and sustainable development.

57. Social policies and development objectives, including housing and ancillary facilities for the poor rural and urban majorities, deserve the highest priority. The quality of African human life cannot be improved if the vast majority of the population lives and works in unacceptable conditions and the expectation of most hard-working people to possess their own standard dwelling can never be realized. Without adequate shelter, the normal pattern, quality and viability of social institutions such as marriage and family life could be jeopardized.

VIII. EDUCATION AND LITERACY

58. Mobilization of the people to play their full and effective part in development, as mandated by the Lagos Plan of Action, requires that all should receive a reasonable measure of knowledge, life and productive skills and correct attitudes. Besides the socialization and traditional education received at home, at least a majority of the young and adult population must receive formal, non-formal or literacy education in adequate and appropriate measure to enable them to function effectively within their modern States and societies. Accordingly, APPER and the United Nations Programme of Action for African Economic Recovery and Development (UN-PAAERD) have made human resources development, of which education and literacy are major components, one of the four priorities for 1986-1990. However, in the 1980s, a combination of increased school-age population, economic crisis and structural adjustment put a brake on the momentum of educational expansion which had been a hallmark

of African development in the 1960s and 1970s. The ECA secretariat figures show that the percentage of primary school enrolment declined from 80 per cent in 1980 to 77.6 per cent in 1986; the secondary enrolment level which had increased by 50 per cent in the 1970s, rose only from 19 per cent in 1980 to 20.7 per cent in 1986 and the tertiary level declined from 1.7 to 1.6 per cent in the same years. 33/ Non-formal education and literacy programmes have similarly been affected by resource constraints.

59. African Governments have invested heavily in education over the years, spending an average of 20-30 per cent of their national budgets on that sector. From 1975 to 1980 regional per capita expenditure for education rose from $US 18 to $US 41. But in the face of financial crisis and social sector cutbacks, it fell to $US 28 in 1985. 34/ The most severe cuts have been in capital expenditures, but major cuts have also been made in recurrent expenditures for books, paper, stationery, repair and maintenance. It should also be noted that the public expenditure figures do not reflect the expenses incurred by parents and guardians. Through the various fee-for-service and cost-recovery measures of the SAPs, pupils and students must pay for textbooks, pens, pencils, training materials and food whose costs rose tremendously in many countries in the 1982-1987 period.

60. Poor and low-income families who could not afford the high cost of education and school supplies had their children go without them. Some evidence shows that some children were being withdrawn from school to help in whatever productive or income-generating activities they could find to supplement the incomes of their impoverished families. The result was that school enrolments declined in many countries, drop-out rates increased, primary school attendance fell and child labour began to grow. Worldwide, Africa had the highest attrition rates in primary schools in 1982. Repetition of classes by children was also high, ranging from 25 to 30 per cent in some countries including Angola, Burundi, Cameroon, Chad, the Congo, Gabon, Guinea-Bissau and Togo. 35/ The factors identified for such poor performance included poverty, malnutrition, ill-health of the children and poor school infrastructure.

61. Literacy and non-formal education have not grown fast enough to compensate for the shortfalls in the formal educational system. Table 5 shows the slow rate of growth in literacy in the subregions between 1982 and 1986. The percentages of literates in 1986 were highest in East and Southern Africa (63 per cent) and Central Africa (57 per cent) and lowest in West Africa (36 per cent). In all subregions, the levels for women were much lower than for men, with West Africa and North Africa showing the lowest percentages

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33/ ECA, Survey of Economic and Social Conditions, 1985-1986, pp. 168-169, table IX.6.

34/ Ibid.

35/ United Nations, Living conditions in developing countries, pp. 60-61.

of literate women. In the latter case, the percentage for women was half that of men. With such high levels of illiteracy, especially among women, the struggle to improve health, fertility and economic performance faces really serious obstacles.

62. With a few exceptions, non-formal education in its various forms of adult education, vocational training, animation rurale, village polytechnics and rural development and youth centres suffered from the general economic decline and financial cutbacks. The exceptions included Ethiopia which had made an outstanding progress in literacy since 1979 and the United Republic of Tanzania which had maintained its emphasis on non-formal education and community-based social development ins pite of economic hardships.

63. At present, the social and economic contributions which education and literacy are expected to make to Africa's recovery and development efforts are severely constrained. There is also a serious threat of human wastage through non-attendance at school, premature curtailment of training and poor quality education due to poor infrastructure and resources. The wastage is seen most at the primary school level and among the poor and vulnerable social groups. In most countries more than 40 per cent of children at school going age were not attending school in 1983-1984. Of those who attended the primary level, as few as 10 per cent got to the secondary level and of those not more than 1 per cent entered university. Apart from these issues, fundamental problems of structure and content still plague the educational systems. Schools and educational facilities are concentrated in the urban areas; there is a high foreign content and orientation in many curricula in the formal and non-formal sectors which make them irrelevant. Quite importantly, there is not sufficient emphasis on scientific and technical training which is so crucial for the mastery of the harsh African environment. More human wastage is perpetrated in the continuing preference for boys over girls in education, which ignores the demographic strength and important position of women in Africa's social and economic development.

64. Social inequality and the poor match between the output of the educational system and the demand of the African labour market has contributed not only to the continent's underdevelopment but also to social frustration and poverty. The educational system has operated in all countries on a highly selective basis. In 1985 the first level accounted for 77.9 per cent of total enrolment, the secondary level for 20.4 per cent and the tertiary level for only 1.7 per cent. But public and social expenditure on the relatively fewer secondary and university students was enormous compared to what was spent on the majority of the primary schoolers. For example, in Kenya in the early 1980s, government expenditure per student-year in secondary and tertiary education was respectively 6 and 85 times higher than in primary education. 36/ Likewise, the Ministry of Education and Culture in Ghana estimated in 1987 that in terms of costs to government, for every student educated in secondary school,

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36/ ILO/JASPA, "Recent trends in employment", op.cit., p.14

4 pupils could be educated at the primary level, and for every student educated at the university level, 120 children could be catered for in primary school. 37/

65. The fundamental problems of equity in the educational system exist mostly at the primary level and with respect to girls in the higher levels. The disproportionate investment of governments in the higher level has been reinforced by donors who have helped to entrench inequality in the basic need of education. According to the World Bank, most bilateral donors in 1983 spent less than 4 per cent of their assistance on primary education and over 42 per cent on higher education. On a per capita basis, they spent $US 1.10 per primary school student and about $US 575 per higher level student. 38/

66. With the system of subsidized boarding schools and universities throughout Africa, the fortunate few in those institutions are truly privileged. Therefore, when they graduate and become unemployed or unemployable because of lack of jobs or appropriate skills, the countries and societies suffer terrible losses. The ECA secretariat estimates that there are at present 4 to 5 million educated unemployed persons in the continent. In the West African subregion, in particular, and to some extent in North Africa, there is the highly costly trend of unemployed university graduates. Paradoxically, many countries in the same subregions rely heavily on expatriate skilled manpower. Besides the unemployed graduates looking for jobs, some highly skilled and experienced professionals have left their countries for political reasons and because of dissatisfaction with poor working conditions - low salaries, unrepaired equipment, lack of books and other working materials. By mid-1987 the African "brain-drain" had reached an estimated level of 70,000 persons. If the skilled refugees are added, then the human resource drain in the continent is a tremendous loss in talent and social investment. 39/

67. There is no doubt that the equitable distribution of educational opportunities, educational reform, quality and expansion and the judicious utilization of human resources are some of the difficult challenges facing African Governments today. For example, under the SAP reforms, Ghana has planned to remove educational subsidies, eliminate boarding facilities, and

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37/ Ghana, Ministry of Education and Culture, "Information Paper on the Education Reform Programme" (dd.14 November 1987).

38/ See Robert J. Berg and Alan K.L. Yu, "The role of bilateral donor organizations in human resources development in sub-Saharan Africa", (E/ECA/ICHD/88/35) paper prepared for the International Conference, Khartoum, the Sudan, 5 to 8 March 1988, pp. 13-15.

39/ See ECA, "Long-term development and structural change in Africa: Manpower planning and utilization", (ECA/ICHD/88/32) paper prepared for the International Conference, Khartoum, the Sudan, 5 to 8 March 1988.

institute cost-recovery for services and supplies. While the equity goals are clear, the measures are threatening the educational opportunities of the poorer students. Therefore, the Government has had to introduce scholarships and loan schemes to assist such students.

68. Throughout the region, the implementation of APPER and the UN-PAAERD could run into serious difficulties because of the complex human resources mobilization and manpower development problems. Therefore, it is necessary for governments to consider measures to link specific reforms of the formal educational system with the wider needs of human resources mobilization, planning and utilization. The mass of the populations, notably women, farmers, urban labour and youth need to be motivated and organized through democratized, community-based, socially beneficial educational programmes to participate more effectively in necessary social and economic changes and transformations. If the majority of the above social groups are left illiterate and ill-educated because of their poverty and bad social policies, they would continue to have low absorption capacities for modern development ideas and technologies. Their opportunities for improving their own welfare through self-reliance would also be limited and so would their ability to claim and defend their rights and privileges in their modern States and societies.

IX. SOCIAL INTEGRATION AND THE POLITICAL CONDITIONS FOR SOCIAL DEVELOPMENT

69. African Governments are increasingly paying greater attention to the social dimension of development, since that is the context within which economic and political gains can be consolidated. Thus, many national development plans are giving prominence to the social sector. In some countries such as Algeria and Cameroon, the social development sectors have been placed at the very beginning of recent national development plans to emphasize their growing importance. At the same time substantial increases in budgetary allocations have been made. In Algeria, the total investment for housing, health, education, training and leisure was raised from 18.4 per cent in 1980-1984 to 32 per cent of total government expenditure in 1985-1989. This placed the social sector second only to industry with 38 per cent. 40/ Such developments acknowledge that the people, in their individual persons and social groups, constitute the agents and principal means of achieving society's essential goals. All the people must be positively and appropriately involved in the economic, social and political processes to ensure the orderly growth and welfare of the society as a whole. This is the content of social integration whose long-term goal is social cohesion.

40/ Algeria, Ministère de la planification et de l'aménagement du territoire, Deuxieme Plan quinquennal 1985-1989 : Rapport général (janvier 1985), annexe A.

70. Poverty and social inequality, as has been shown in this paper, lie at the root of the disabilities of the majority of the African populations especially in the rural areas. In times of economic recession, natural or man-made disasters and in the context of particular types of structural adjustment as witnessed in the period 1982-1987, the social development of the poor, where they remained alive, was greatly undermined. To alleviate or eradicate poverty, there must be the political will to reorient development priorities and material allocations. This is why the examples of countries such as Algeria, Cameroon and Zimbabwe in giving greater political and budgetary support to social development at this crucial period of Africa's development are significant.

71. Most African States are characterized by the pluralistic nature of their societies, urban bias in their development policies, political subordination and marginalization of the majority of the human resources, namely women, and a largely dysfunctional educational system. These are major handicaps to genuine social development. The way out would seem to be the establishment or strengthening of a democratized development process in which effective popular participation and accountability of power would ensure social justice and equity. The widest possible social consensus must be built up to define national development priorities, implementation strategies and the distribution of benefits. Such a consensus is also needed when adjustments and changes have to be made in the development process. The failure of most current structural adjustment programmes to seek such social consensus prior to their implementation has mainly accounted for their high and serious social costs.

72. Several governments have stated policy goals about "decentralization." Greater efforts need to be made to make this a reality. The failure to empower the poor and vulnerable groups and communities and to involve them in the solution to their own problems can result in deeper social problems. For example, poverty-stricken families tend to be conflict-ridden as they struggle to survive. They might lose control of the important socialization functions necessary for the normal and stable development of their children. The cost of such failure might manifest itself in serious juvenile delinquency, crime and drug abuse of the youth and young adults. If this happens, the price to the society of later control and rehabilitation could be enormous. 41/ Moreover, the continued neglect of deepening mass poverty could lead to further segmentation of African society. The poor might be pitted against the rich over and above the existing conflicts between ethnic and other segments. Under such circumstances, the task of social reconstruction and transformation and the homogenization of social values to support development would be rendered most difficult.

41/ See Akeredolu-Ale, "The human situation in Africa today", op.cit., pp. 22-23.

73. The above concerns are generally known. However, much systematic empirical research is needed to establish precisely the magnitude and ramifications of the problems. Another area requiring urgent study is the possibility of embarking on social equity with little or limited resources. As noted at the beginning of this paper, social development does not flow automatically from economic growth without a determined social policy backed by political will. There are some instances in the continent where some poor least developed countries (LDCs) have made notable progress towards social equity in certain social sectors. Ethiopia has done this with literacy; Burkina Faso with child immunization; and Cape Verde and Lesotho with universal primary education. This suggests that equity measures may be a matter more of social and political choice than of aggregate income levels of countries. What is more, many equity gains can be made through the use of low-cost strategies and technologies and through community mobilization. UNICEF has demonstrated how the lives of millions of poor children can be saved through low-cost oral rehydration therapy. Improving women's equity could also be inexpensive if existing facilities in formal and non-formal education, health and agricultural credit were improved and affirmative social, cultural and political actions taken to encourage women to utilize such facilities.

74. Finally, two other socio-political conditions must be mentioned because of their impact on social (and economic) development. These are intolerance and political instability. Intolerance (political, ethnic and religious) is one of the root causes of the refugee problem and the brain-drain. The serious social dislocations and loss of social investments in the refugee and brain-drain phenomena call for governments to consider really effective measures to minimize socio-political intolerance in their pluralistic societies. Likewise, political instability has an impact on the implementation of social development programmes and projects. Since investments in the social sector take a relatively long time to show returns, frequent changes of government if accompanied, as they tend to be, by discontinuation and rejection of well-intentioned social programmes and projects, the whole society, and particularly the poor, suffer repeated losses.

X. CONCLUSION AND RECOMMENDATIONS

A. Conclusion

75. A human crisis had been developing in Africa, at least since the mid-1970s, as a result of structural imbalances, policy misorientations and growing economic difficulties. In 1982-1984 a severe drought exacerbated the problems and produced an intolerable social situation. Poverty, which was linked to basically unequal access to income and other resources of social development, became widespread from 1982-1987. Famine and malnutrition decimated populations and millions of Africans were displaced from their homes as a result of ecological emergencies which have turned out to be recurrent. Economic policies had not always taken account of social needs and social betterment had not flowed automatically from economic growth. In particular, structural adjustment programmes adopted by most African countries had sought quick financial stabilization and economic recovery at the expense of the wellbeing of the vast majority of the populations, notably the rural and urban poor, women and children.

76. The review in this paper has tried to summarize the above developments in the major social sectors. The negative trends and policy issues identified are interrelated and, therefore, their solutions should be sought in an integrated manner. The paper has shown in particular that the pressing problem of hunger is related more than ever before to income and exchange entitlements than to aggregate food supply, although the latter is important. Hence, the continent's poor nutritional status is related to poverty and poverty to unemployment and underemployment. All these in turn concern equity in education, human resources development and mobilization, and the distribution process. A great deal of research needs to be undertaken on all these issues as the paper has frequently pointed to the inadequacy of the social data. Without the close and dynamic social, economic and political interrelationships, indicated in this paper as necessary for the development process, the African social situation may continue to be beset with unnecessary suffering, human wastage and destructive tensions.

B. Recommendations

77. Under the different sections of the paper, some proposals have been made as to the direction and types of policy changes and actions that could be undertaken to redress particular problems identified in the areas of population, employment, food and nutrition, health, human settlements, especially shelter, education and literacy and social integration. It would be impossible and undesirable in such a paper to propose further detailed and specific recommendations in all these social subsectors. Besides, it would be unnecessary, because African Governments are presently disposed of major policy guidelines and action plans that spell out a great deal of the required measures. These include the master strategy of the Lagos Plan of Action (1980), APPER (1985), the UN-PAAERD (1986), the Kilimanjaro Programme of Action on Population and Development (1984), the Regional Plan of Action on Youth (1983), the Arusha Strategies for the Advancement of Women in Africa (1984), the Nairobi Forward-Looking Strategies for the Advancement of Women (1985), the Charter for the Health Development of the African Region by the Year 2000 (1979), the OAU Declaration on Health as a Foundation for Development (1987), the Abuja Statement (1987) and the Khartoum Declaration Towards a Human-Focused Approach to Socio-Economic Recovery and Development in Africa (1988).

78. There also exists a series of high-level regional policy-making or advisory organs that review the different aspects of the social situation periodically and evolve sectoral strategies and guidelines. These include the Conference of African Ministers of Social Affairs, the Conference of African Ministers of Health, the OAU Labour Commission (of Ministers), the Conference of African Ministers Responsible for Human Resources Planning, Development and Utilization, the Regional Conference and the Africa Regional Co-ordinating Committee for the Integration of Women in Development, the Joint Intergovernmental Committee on Human Settlements and Environment, and the Joint Conference of African Planners, Statisticians, Demographers and Information Scientists.

79. Therefore, the following proposals for consideration focus on the broad macro-level policy issues. It is hoped that they can help to promote a better integration of social development policies and programmes in a balanced framework of socio-economic development planning.

(a) Framework for developing social policies and programmes in an integrated planning process

(i) Mechanisms should be instituted to generate and sustain the widest possible consensus on social development goals and objectives. This implies decentralization of decision-making and promotion of effective popular participation at all levels of the development process;

(ii) Central planning institutions and processes should ensure a judicious balance between economic and social needs in national development plans or action programmes. The basic needs of food, shelter and ancillary facilities, health, primary education and literacy, and income from employment should be safeguarded and promoted with due regard to the population structure and distribution;

(iii) Social development policies must be developed and maintained in a complementary and mutually supportive relationship with economic policies. There must be close and constant communication and interaction between policy-makers at the macro-economic level and those concerned with social development. Above all, there should be agreement on the need and modalities for bringing about healthy rural transformation as a crucial priority;

(iv) A framework should be evolved for developing social policies and programmes that aim at breaking the deep-rooted dualism in national development. Socio-economic investments, infrastructure and services should be "de-urbanized" and their patterns of distribution changed to ensure equality of access for the different socio-economic groups to productive resources, opportunities and social services;

(v) Social targeting should be developed and reflected in development projects to ensure that areas and segments of society previously ignored are covered. This is particularly necessary for women, the rural and urban poor, unemployed youth and children;

(vi) All economic development project proposals should be required to indicate their social implications and the measures to be taken to prevent or minimize adverse effects particularly on the environment and people's incomes and welfare;

(vii) Where marco-economic structural adjustments have to be made, they must adopt a human-centred approach so that the new structures of development and patterns of economic growth are equitable, entail the full participation of the people and have necessary, well-targeted safety-nets for the poorest socio-economic groups. In this regard, short- and medium-term measures should always be linked to long-term development goals and strategies;

(viii) Adequate budgetary allocations should be made to the social sectors, regarding these as investments with multiplier effects on human development. They should also be allowed adequate time to yield the desired results.

(b) Social research and policy analysis

(i) Given the dearth of social data, member States should strengthen the capabilities of their social sector ministries, social research institutions and central statistical offices to undertake systematic data collection, surveys, situational analyses and indepth studies of major social issues and problems;

(ii) Data collected through such research should be disaggregated at least by demographic, gender, geographical and income variables to facilitate analysis of qualitative social changes;

(iii) Capabilities should be developed or strengthened for regular social policy reviews and analysis based on the research data and information gathered.

(c) Implementation of social policies and programmes

(i) Social sector ministries and departments should co-operate as much as possible in the implementation of interrelated policies and programmes. In that regard, joint planning of programmes and activities, intersectoral seminars, workshops and meetings and the pooling of resources should be encouraged to enhance the efficiency and effectiveness of service delivery;

(ii) Non-governmental organizations (NGOs) operating in the social field should be encouraged to co-ordinate their activities with the sectoral ministries and departments as well as the central planning ministries to ensure the pursuit of common national priorities and avoid duplication and undue fragmentation of social efforts;

(iii) Effective monitoring and evaluation mechanisms should be established to ensure prompt adjustments in policies and programmes where necessary and expansion or replication of successful experiences.

(d) Use of donor assistance in social development

(i) Member States should co-ordinate and consolidate their internal social policies, priorities and approaches on the basis of which they can negotiate with their development partners regarding social investments;

(ii) Innovative approaches must be sought within each national context on the productive use of certain types of assistance to promote equity; for example, the use of food aid to enhance primary school attendance, work for women and unemployed youth, and primary health care.

(e) Regional and international co-operation

(i) Member States should intensify their co-operation in the search for and implementation of solutions to common social problems including poverty, unemployment, the existence of refugees and displaced persons as well as the political problems of instability and inter-State conflict;

(ii) Member States should promote the recording and sharing of successful experiences in the different areas of social development. They should also promote the exchange of qualified personnel and trainees among their institutions;

(iii) The United Nations bodies, especially ECA, should assist member States in all aspects of social development policy formulation, programme planning and implementation within a balanced social and economic development framework.